BEST ANGUE COPY												
Application or Docket Number												
	PATENT A											
Effective October 1, 2000										00	co 267	151
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
TC	TAL CLAIMS		20				R	ATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	BASIC FEE		OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		· 4		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			-3 minus 3 =		. 1		×	40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				Ι.	135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II									<u> </u>		OTHER	
	// a gree	(Column 1)		(Colur		(Column 3)	SA	MALL	ENTITY	OR	SMALL	ENTITY
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL PEE		RATE	ADDI- MONAL FEE
NDM	Total	.20	Minus	-2	Ø	-0	X	\$ 9=		OR	X\$18=	•
AME	Independent • 3		Minus ••• C		<u> </u>	· 0	×	40=/		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						. +1	6 5=		OR	.+270 =	
			•				4	TOTAL		OR	YOTAL	•
ŀ	(Column 1) (Column 2) (Column						ADD	IT. FEE	L		ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total	. 20	Minus	• 2	0	8	X	\$ 9=		OR	X\$18=	
AME	Independent • 3		Minus		5			40=	7	OR	X80=	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								35=		OR	+270=	
	7/35/05 (Column 1) (Column 2) (Column 3)							TOTAL T. FEE		OR	YOTAL ADDIT. FEE	
	1/251	(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT : EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NO	Total	.20	Minus		20	- /	X	9=	. 1	OR	X\$18=	<i>"</i>
3	Independent · · 3		Minus •••		3	=	×	40=		OR	X80=	7
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	+270=	
•	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "1." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "1."											